

INTRODUCING STANDARD TREATMENT SCHEDULE THROUGH
FACE-TO -FACE EDUCATION: A WAY TO IMPROVE
PRESCRIBING PRACTICES AT BRAC HEALTH CENTERS

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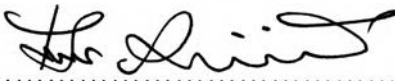
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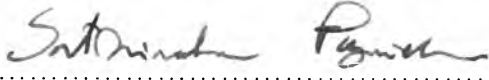
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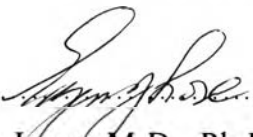

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ABSTRACT

Prescribers are helmsmen and focal person for improving rational prescribing. The use of drugs in the treatment of childhood diarrhea will be investigated by looking through retrospective secondary data at BRAC Health Centers (BHC). These are privately run health facilities situated in the rural areas of Bangladesh for delivering curative care along with their community based preventive health services to the people who do not have easy access to the government health care delivery system. No study has been done yet in BRAC setting to measure the condition of rational use of drugs. Appropriate treatment of childhood diarrhea will be emphasized by introducing standard treatment schedule (STS) on diarrhea through face-to-face education to the prescribers of BHCs.

Standard treatment schedule is familiar in the organizational setting. There are two standard treatment algorithms now operating smoothly in BRAC community based setting, one is on ARI and the other is on TB. The cure rate in TB control program is 86% (1996-97), which has increased from 73% (objective is 90% by the year 2000) and the cure rate in ARI control program is 99% (1996), already supersede the targeted cure rate of 85%. So, introducing standard treatment on diarrhea is feasible and realistic in these static rural health care centers to improve the rational use of drugs.

The main objective of the proposed study is to improve rational prescribing by the prescribers of BHCs. The study will be an experimental pretest posttest design with both quantitative and qualitative approach. Retrospective review of prescription records will be the main data collection technique. For the qualitative purpose, several in-depth interviews will be conducted to explore the knowledge of the prescribers and for developing motivating messages during educational sessions. To develop skill in handling obstacles during data collection process, data exercise was done in Thailand. The prescribing indicators that will be measured are (1) percentage of encounters prescribed with ORS, (2) percentage of encounters prescribed with an antibiotic, (3) percentage of encounters prescribed with an anti-amoebic agent.

The results of this study will be evidence to the planners and policy makers to introduce other treatment schedules to the prescribers of BRAC Health Centers to ensure rational prescribing, hence promote rational use of drugs.

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CONTENTS

	Page
ABSTRACT-----	III
ACKNOWLEDGEMENTS -----	IV
TABLE OF CONTENTS -----	VI
LIST OF FIGURES AND TABLES -----	XI
LIST OF ACRONYMS -----	XII

CHAPTER I

1. Introduction -----	1
-----------------------	---

CHAPTER II: ESSAY

INTRODUCING STS THROUGH FACE-TO-FACE EDUCATION: A WAY TO IMPROVE PRESCRIBING PRACTICES AT BHCs

2.1 Introduction -----	5
2.2 Problem with the treatment of childhood diarrhea -----	7
2.2.1 Situation in Bangladesh -----	7
2.2.2 Problem statement -----	7
2.3 Rational Use of Drugs -----	11
2.3.1 Definition and Concepts -----	11
2.3.2 Causes of irrational or inappropriate prescribing -----	12
2.3.2.1 Prescriber related factors -----	12
2.3.2.2 Information related factors -----	13

2.3.2.3 Patient related factors -----	14
2.3.3 Consequences of irrational or inappropriate prescribing ---	14
2.4 Rationale for selecting diarrhea -----	15
2.5. Diarrhea and Diarrheal diseases -----	16
2.5.1 Definition of diarrhea -----	16
2.5.2 Clinical types -----	17
2.5.3 Dehydration -----	17
2.5.4 Malnutrition -----	18
2.6 About ORS -----	20
2.7 Conceptual Framework of intervention -----	21
2.8 Possible intervention measures to improve rational prescribing -----	24
2.8.1 Mechanisms -----	25
2.8.2 Face-to-face Education -----	27
2.8.3 Other strategies versus face-to-face education -----	28
2.8.4 Focus and selection of interventions -----	30
2.8.5 Standard treatment schedule -----	31
2.9 Conclusion -----	34
Reference-----	35

CHAPTER III: PROPOSAL

INTRODUCING STS THROUGH FACE-TO-FACE EDUCATION: A WAY TO IMPROVE PRESCRIBING PRACTICES AT BHCs

3.1 Introduction -----	40
3.1.1 Background -----	40
3.1.2 Problem statement -----	42

3.2 Rationale -----	43
3.2.1 About prescribing -----	43
3.2.2 About diarrhea -----	44
3.2.3 About Standard Treatment Schedule -----	45
3.3 Objective -----	46
3.3.1 Overall objective -----	46
3.3.2 Specific Objectives -----	46
3.4 Study design -----	47
3.4.1 Approach -----	48
3.4.1.1 Examination of the existing behavior -----	50
3.4.1.2 Diagnosis the motivating factors and/or underlying causes -----	51
3.4.1.3 Treatment: Design and implement intervention -----	52
3.4.1.4 Evaluation of the project -----	52
3.4.2 Process -----	53
3.4.2.1 Monitoring of the prescriptions -----	53
3.4.3 Type of facility -----	54
3.4.4 Type of prescribing encounters -----	54
3.4.5 Type of data -----	55
3.5 Sample size -----	55
3.5.1 Principles for sample size -----	55
3.5.2 Sampling procedure -----	56
3.5.3 Data collection -----	56
3.6 Activity plan with timetable -----	57
3.6.1 Study period -----	57

3.6.2 Activity plan, July 1999- December 2000 -----	58
3.7 Budget and manpower -----	58
3.8 Sustainability of the project -----	60
3.8.1 Drug treatment auditing - a means of sustainability of this project -----	61
3.8.2 Who will do auditing and why? -----	61
3.9 Ethical issues -----	62
References -----	63

CHAPTER IV: DATA EXERCISE

INTRODUCING STS THROUGH FACE-TO-FACE EDUCATION: A WAY TO IMPROVE PRESCRIBING PRACTICES AT BHCs

4.1 Introduction -----	66
4.2 Objectives -----	67
4.3 Methodology -----	67
4.4 Data collection	
4.4.1 Technique for data collection -----	68
4.4.2 Instruments for data collection -----	68
4.5 Location and profile of the health center -----	68
4.6 Pre-field activities -----	69
4.7 Sample size -----	69
4.8 Findings and discussions -----	70
4.8.1 Qualitative data -----	70
4.8.2 Quantitative data -----	71
4.9 Lessons learned -----	74

4.10 Limitations -----	75
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CHAPTER V

Presentation -----	76 - 89
--------------------	---------

CHAPTER VI

Bibliography -----	90 - 93
--------------------	---------

APPENDICES -----	94 - 118
-------------------------	-----------------

Appendix - I	List of BRAC Health Centers -----	95
Appendix - II	Services to be covered by BHC -----	96
Appendix - III	Drug list -----	100
Appendix - IV	Prescription Pad -----	104
Appendix - V	Patient Register -----	105
Appendix - VI	Data Collection Form -----	106
Appendix - VII	Indicators Consolidation form -----	107
Appendix - VIII	WHO indicators for RUDs -----	108
Appendix - IX	Guide for in-depth interview -----	109
Appendix - X	Supervision/Monitoring form - 1-----	112
Appendix - XI	Supervision/Monitoring form - 2-----	113
Appendix - XII	Supervision/Monitoring form - 3-----	114
Appendix - XIII	About BRAC -----	115
Curriculum Vitae -----		119

LIST OF FIGURES AND TABLES

Figures:

2.1 Diagrammatic representation of the problem -----
10

2.2 Causes and consequences of irrational prescribing -----13

2.3 Conceptual framework ----- 21

3.1 Causes of death in children under-5 in BRAC, 1996 -----44

3.2 Experimental pretest posttest design ----- 47

3.3 Steps of finding existing practices & their causes and approach
to solve ----- 49

3.4 Flow chart of the study process ----- 53

4.1 Percentage of encounters prescribed with ORS -----71

4.2 Antibiotic use in the treatment of Acute watery diarrhea -----72

4.3 Antidiarrheal use in the treatment of Acute watery diarrhea -----72

Tables:

3.1 Morbidity related data of diarrhea in children under-5 years -----45

3.2 Activity plan -----58

3.3 Budget sheet -----59

4.1 Current prescribing practices-----71

LIST OF ACRONYMS

ARI	Acute Respiratory Infection
BBS	Bangladesh Bureau of Statistics
BRAC	Bangladesh Rural Advancement Committee
BHC	BRAC health Center
CDD	Control of Diarrheal Diseases
ESP	Education Support Program
H&FPPF	Health and Family Planning Facilitation Program
ICDDR'B	International Center for Diarrheal Diseases Research, Bangladesh
ICIUM	International Conference on Improving Use of Medicine
IGVGDP	Income Generation for Vulnerable Group Development Program
INRUD	International Network for Rational Use of Drugs
MDP	Management Development Program
MIS	Management Information System
ORS	Oral rehydration salts/solution
ORT	Oral rehydration therapy
PEOC	Primary Education for Older Children
QoC	Quality of care
RDU	Rational Drug Use
RCP	Rural Credit Program
REP	Rural Enterprise Project
RHDC	Reproductive Health and Disease Control
SLDP	Smallholder Livestock Development Program

STS	Standard Treatment Schedule
TARC	Training and Resource Center
TB	Tuberculosis
UNICEF	United Nations Children Fund
VO	Village Organization
WHO	World Health Organization